

IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF MISSOURI  
WESTERN DIVISION

*(Write the District and Division, if any, of the court in which the complaint is filed.)*

Matthew Todd Nelson

*(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)*

against-  
Christian County Jail  
C.O. House  
Captain Ramage

*(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)*

**Complaint for Violation of Civil Rights**

(Prisoner Complaint)

18-3180-CV-S-MDH-P  
Case No. ..  
(to be filled in by the Clerk's Office)

**REQUEST FOR TRIAL BY JURY**

Plaintiff requests trial by jury.  Yes  No

## I. The Parties to This Complaint

### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Matthew Todd Nelson

All other names by which you have been known:

Matthew Todd Nelson

ID Number

86294

Current Institution

Christian County Jail

Address

110 W. Elm St

Ozark, Mo. 65721

### B. The Defendant(s)

- Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation.
- Make sure that the defendant(s) listed below are identical to those contained in the above caption.
- For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both.
- Attach additional pages if needed.

Defendant No. 1

Name

C.O. House

Job or Title  
(if known)

Correctional Officer

Shield Number

Christian County Jail

Employer

110 W. Elm St

Address

Ozark, Mo. 65721



Individual capacity



Official capacity

Defendant No. 2

Name

Job or Title  
(if known)

Shield Number

Employer

Address

Captain Ramage  
Correctional Staff  
Christian County Jail  
110 W. Elm St  
Brick, Mo. 65721



Individual capacity



Official capacity

## II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):



Federal officials (a *Bivens* claim)



State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights.

What federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

8th amendment of the Constitution as  
proscribed by the United States of America

### III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

Pretrial detainee  
 Civilly committed detainee  
 Immigration detainee  
 Convicted and sentenced state prisoner  
 Convicted and sentenced federal prisoner  
 Other (*explain*) \_\_\_\_\_

### IV. Statement of Claim

Write a short and plain statement of FACTS that support your claim. Do not make legal arguments. You must include the following information:

- What happened to you?
- What injuries did you suffer?
- Who was involved in what happened to you?
- How were the defendants involved in what happened to you?
- Where did the events you have described take place?
- When did the events you have described take place?

If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

#1) Handcuffed, left lacerations & Bruises on Hands. Medical treatment Denied.

#2) Help Hotline# 77, Called Hotline to report abuse, only to be told by CPT. Rammage to quit calling by Email that they wont Help me & threatened to Take My privileges for phone.. and or lock Down/ Seg.

# 3.) filed Many digital grievances to be told I cannot have copies & to hire a lawyer and no copies of pictures taken of my hands by Sgt. Mack was Denied any and all request of grievances Since Nov. 21<sup>st</sup> 2017 to present present day.

## V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Open wounds on wrist and Bruising of  
Hands. filed M.S.R to only be denied  
Medical treatment & x-Rays.

Neglect - Could Not Report abuse from  
#77. Call was filtered by Captain  
Reports of abuse Never reported to  
appropriate facilitator.

## VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Requesting Money damages Seen fit for  
Cruelty by Judge. I was mentally Scarred  
and Afraid of My living  
Conditions and My Personal Safety.  
Punitive Damages for Cruel and unusual punishment  
as proscribed by the 8th Amend. of the U.S. of America.

## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act (“PLRA”), 42 U.S.C. § 1997e(a), requires that “[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted.”

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes  
 No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Christian County Jail  
 Ozark, Mo. 65721

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

Yes  
 No  
 Do not know

C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

Yes  
 No  
 Do not know

If yes, which claim(s)?

\_\_\_\_\_

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

Yes  
 No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes  
 No

E. If you did file a grievance:

1. Where did you file the grievance?

Christian County Jail  
Clark, Mo. 65721

2. What did you claim in your grievance? (Attach a copy of your grievance, if available)

Subject was abuse by staff

(Christian County will Not Release)  
(grievance to My Person.)

3. What was the result, if any? (Attach a copy of any written response to your grievance, if available)

Remedy was have a lawyer  
Subpoena all reports and internal  
investigations.

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

yes

Digital grievances filed on  
I.C. Solutions Digital kiosk

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

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2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

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G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

Christian County Jail will not release copies of any of my digital grievances so I can't properly file my claims against them.

*(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)*

### VIII. Previous Lawsuits

The “three strikes rule” bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has “on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this “three strikes rule”?



Yes

No

If so, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

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A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes  
 No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (*If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.*)

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

2. Court (*if federal court, name the district; if state court, name the county and State*)  
\_\_\_\_\_

3. Docket or index number  
\_\_\_\_\_

4. Name of Judge assigned to your case  
\_\_\_\_\_

5. Approximate date of filing lawsuit  
\_\_\_\_\_

6. Is the case still pending?

Yes  
 No

If no, give the approximate date of disposition. \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

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C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

Yes  
 No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county and State)

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3. Docket or index number

---

4. Name of Judge assigned to your case

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5. Approximate date of filing lawsuit

---

6. Is the case still pending?

Yes  
 No (If no, give the approximate date of disposition):  
\_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

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## IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing 6<sup>th</sup> of June 2018

Signature of Plaintiff

Printed Name of Plaintiff

Prison Identification #

Prison Address

City State Zip Code

Matthew T. Nelson  
Matthew T. Nelson  
County ID # 86294  
110 W. Elm St  
Ozark, Mo. 65721

Matthew Todd Nelson (86294) 33-48-2913

Christian County Jail

116 W Elm St Rm 70

Ozark, Mo. 65721

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KANSAS CITY, MO.

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(Clerk's Office)

United States District Court  
Western District of Missouri

1400 U.S. Courthouse

(Legal Mail)

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Springfield, Mo. 65806

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